



Docket No.: 614.1788D

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Toru OKAWA

Serial No. 09/734,701

Group Art Unit: 2173

Confirmation No. 7516

Filed: December 13, 2000

Examiner: Ba Huynh

For: DISPLAY CONTROL SYSTEM CAUSING IMAGE ON DISPLAY SCREEN TO  
DISAPPEAR AND REAPPEAR IN A FRIENDLY MANNER TO USER

**RECEIVED**

SEP 29 2004

Technology Center 2100

**AMENDMENT**

Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed March 24, 2004, and having a period for response set to expire on June 24, 2004. A Petition for a Third Month Extension of Time, together with the requisite fee is enclosed, thereby extending the response due date to September 24, 2004.

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.

9/27/2004 HLE333 00000030 09734701

1 FC:1253	950.00 OP
2 FC:1201	172.00 OP

11/17/2004 KRAYSON 00000001 193935 09734701

01 FC:1201	258.00 DA
02 FC:1202	36.00 DA

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

9. 734701

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	44 minus 20 =	24
INDEPENDENT CLAIMS	34 minus 3 =	31
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	44	Minus	44	= 1
Independent	34	Minus	34	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	22	Minus	44	= 1
Independent	16	Minus	34	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	24	Minus	22	= 2
Independent	16	Minus	16	= 3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	32
X40=		OR	X80=	2480
+135=		OR	+270=	
TOTAL		OR	TOTAL	3632

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	36
X80=	258
+270=	
TOTAL ADDIT. FEE	